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26574 7590 11/09/2004

SCHIFF HARDIN, LLP
PATENT DEPARTMENT
6600 SEARS TOWER
CHICAGO, IL 60606-6473
02/02/2005 LWUNDIN# 00000136 09937971

01 FC:1501 1400.00 OP



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Steven H. Noll	(Depositor's name)
<i>Steven H. Noll</i>	(Signature)
January 26, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/937,971	10/01/2001	Mart Min	P01,0338	8948

TITLE OF INVENTION: RATE ADAPTIVE PACEMAKER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400	\$0	\$1400	02/09/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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JASTRZAB, JEFFREY R	3762	607-024000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. Schiff Hardin LLP

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

St. Jude Medical AB

Järfälla, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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A check in the amount of the fee(s) is enclosed.
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Authorized Signature _____

Date January 26, 2005

Typed or printed name _____

Steven H. Noll

Registration No. 28,982

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